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| POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/693,657 |
| | Filing Date | October 24, 2003 |
| | First Named Inventor | Sylvain Chemtob |
| | Title | Cytokine Receptor Modulators and Method of Modulating |
| | Art Unit | 1646 |
| | Examiner Name | Bruce D. Hissong |
| | Attorney Docket Number | 2008693-0003 |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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OR

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| Practitioner(s) Name | Registration Number |
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I am the:

☐ Applicant/Inventor.

OR

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-------------------|----------------------------|-----------|--------------|
| Signature | <i>[Signature]</i> | Date | 8 Feb. 2009 |
| Name | M. L. LEPOUX | Telephone | 514-340-8243 |
| Title and Company | Managing Director UNIVALOR | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.

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